Image# 13944225054 PAGE 1 / 40

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TOTAL OX	or Other Than An Aut	norized Committe	е	Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	g, type 12FF	34M5
American Council of Lif	e Insurers Political A	Action Committee	e	
ADDRESS (number and street)	101 Constitution Ave., NW			
Check if different	Suite 700			
than previously reported. (ACC)	Washington		DC	20001
2. FEC IDENTIFICATION NU	MBER ▼ CI	ГУ▲	STATE	▲ ZIP CODE ▲
C C00147066		S THIS X (N	or	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:		ay 20 (M5)	Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Nov 20 (M12)
(a) Quarterly Reports:	Mai	r 20 (M3) Ju	ın 20 (M6)	Sep 20 (M9) X Dec 20 (M12) (Non-Election Year Only)
April 15		20 (M4) Ju	ıl 20 (M7)	Oct 20 (M10) Jan 31 (YE)
Quarterly Report (Q	(C) 12-Day	Primary (12P)	G	eneral (12G) Runoff (12R)
Quarterly Report (Q2 October 15	Report for the:	Convention (1	2C) Sp	pecial (12S)
Quarterly Report (Q3	Floatie	M = M /	D D / Y Y	in the
Year-End Report (YE July 31 Mid-Year		on on		State of
Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Ru	unoff (30R) Special (30S)
Termination Report (TER)	Election	on on	D D / Y Y	in the State of
5. Covering Period 11	01 2013	through	11 30	
I certify that I have examined this	s Report and to the best of	f my knowledge and be	elief it is true, corre	ect and complete.
Type or Print Name of Treasurer	Mr. Donald L. Walker			
Signature of Treasurer Mr. Do	onald L. Walker	[Electronically	Filed] Date	12 / 19 / 2013
NOTE: Submission of false, errone	ous, or incomplete informatio	n may subject the perso	on signing this Repo	ort to the penalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Council of Life Insurers Political Action Committee

Report Covering the Period: From: 11 01 2013 To: 11 30 2013

	COLUMN A This Period			
(a) Cash on Hand January 1, 2013		278831.80		
(b) Cash on Hand at Beginning of Reporting Period	439917.92			
(c) Total Receipts (from Line 19)	31976.88	482263.00		
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	471894.80	761094.80		
Total Disbursements (from Line 31)	17500.00	306700.00		
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	454394.80	454394.80		
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00			
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00			

X

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Council of Life Insurers Political Action Committee

Report Covering the Period: From: 11	01 2013 To	: 11 30 2013					
I. Receipts	I. Receipts COLUMN A Total This Period						
. Contributions (other than loans) From:	utributions (other than loans) From:						
(a) Individuals/Persons Other							
Than Political Committees	24615.40	249903.90					
(i) Itemized (use Schedule A)	24010.40	7					
(ii) Unitemized(iii) TOTAL (add	1861.48	35659.10					
Lines 11(a)(i) and (ii)	26476.88	285563.00					
(b) Political Party Committees	0.00	0.00					
(c) Other Political Committees (such as PACs)	5000.00	189700.00					
(d) Total Contributions (add Lines							
11(a)(iii), (b), and (c)) (Carry							
Totals to Line 33, page 5)▶	31476.88	475263.00					
. Transfers From Affiliated/Other							
Party Committees	0.00	0.00					
	0.00	0.00					
All Loans Received	0.00	0.00					
Loan Repayments Received	0.00	0.00					
. Offsets To Operating Expenditures	7	7					
(Refunds, Rebates, etc.)							
(Carry Totals to Line 37, page 5)	0.00	0.00					
. Refunds of Contributions Made	7	7					
to Federal Candidates and Other							
Political Committees	500.00	7000.00					
. Other Federal Receipts							
(Dividends, Interest, etc.)	0.00	0.00					
Transfers from Non-Federal and Levin Funds							
(a) Non-Federal Account							
(from Schedule H3)	0.00	0.00					
(b) Levin Funds (from Schedule H5)	0.00	0.00					
(a) Total Transfers (add 19(a) and 19(b))	0.00	0.00					
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00					
. Total Receipts (add Lines 11(d),							
12, 13, 14, 15, 16, 17, and 18(c))▶	31976.88	482263.00					
Total Federal Receipts (subtract Line 18(c) from Line 19)▶	31976.88	482263.00					
(Subtract Line 10(c) Holl Line 19)	31970.00	402203.00					

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN B Calendar Year-to-Date			
1. (Dperating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total This Period	Caronida Tour to Buto		
	(i) Federal Share	0.00	0.00		
	()				
	(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	0.00	0.00		
(Expenditures c) Total Operating Expenditures	0.00	0.00		
((add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00		
٦	Fransfers to Affiliated/Other Party	7 7			
(Committees	0.00	0.00		
F	Contributions to Federal Candidates/Committees and Other Political Committees	17500.00	300600.00		
I	ndependent Expenditures				
(use Schedule E)	0.00	0.00		
(2 U.S.C. §441a(d)) use Schedule F)	0.00	2.22		
(use Schedule F)	0.00	0.00		
	oan Repayments Made	0.00	0.00		
	Loan Hopayments Wade	7 7			
	_oans Made	0.00	0.00		
	Refunds of Contributions To: (a) Individuals/Persons Other				
(Than Political Committees	0.00	0.00		
	b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	0.00		
	(such as PACs)	0.00	3.00		
(d) Total Contribution Refunds				
`	(add Lines 28(a), (b), and (c))▶	0.00	0.00		
(Other Disbursements	0.00	6100.00		
	Federal Election Activity (2 U.S.C. §431(20))				
((a) Allocated Federal Election Activity (from Schedule H6)				
	(i) Federal Share	0.00	0.00		
	() . 555.5. 5.1.5				
	(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely				
	With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add	0.00	0.00		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
7	Total Disbursements (add Lines 21(c), 22,				
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	17500.00	206700 00		
-	20, 24, 20, 20, 27, 20(d), 20 and 00(0))	17300.00	306700.00		
٦	Total Federal Disbursements				
	subtract Line 21(a)(ii) and Line 30(a)(ii)				
f	rom Line 31)	17500.00	306700.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 20 1 31m 37t (110v. 02/2000)		1 490 0
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	31476.88	475263.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31476.88	475263.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		6	OF		40	
(check only one)											
×	11a		11b		11c		12	2			
	13		14		15		16	6		17	

	Statements may not be sold or used by any personne name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Council of Life Insur	ers Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. David A. Wheat		Date of Receipt
Mailing Address 5817 S. Walden Street		11 11 2013
City Centennial	State Zip Code CO 80015-5912	Transaction ID : 56838118 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	600.00
Name of Employer Hannover Life Reassurance Company of A Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President & CFO Aggregate Year-to-Date ▼ 600.00	-
Full Name (Last, First, Middle Initial) Ruth B. Smith Mailing Address One National Life Drive	I	Date of Receipt
City Montpelier	State Zip Code VT 05604-1000	Transaction ID : 56838119 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1500.00
Name of Employer National Life Insurance Company	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial)	1	Date of Receipt
Mailing Address 15456 Dallas Parkway Suite 800	7. 6.	11 18 2013
City Addison	State Zip Code TX 75001	Transaction ID : 56841720 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
National Life Group Receipt For: Primary General Other (specify) ▼	VP, Strategy and Business Development Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	>	2350.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. James P. Rousey Date of Receipt Mailing Address 1609 Windycrest Drive 2013 11 18 City State Zip Code Transaction ID: 56841722 Springfield IL 62704-6515 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Universal Guaranty Life Insurance Comp President Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Pamela N Blalock Date of Receipt Mailing Address One National Life Drive 11 18 2013 City State Zip Code Transaction ID: 56841723 VT Montpelier 05604-1000 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation National Life Group VP & Regional Development Office Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Thomas E. Rattmann Date of Receipt Mailing Address 2601 Pinebluff Drive 11 18 2013 City Zip Code State Transaction ID: 56841724 NY Vestal 13850-2909 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 С federal political committee. Name of Employer Occupation Chairman of the Board, President & Chi Columbian Mutual Life Insurance Compan Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		8	OF		40		
(0	(check only one)											
	X	11a		11b		11c		12				
		13		14		15		16	;		17	

or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	the name and address of any political committee t	
American Council of Life Insur	ers Political Action Committee	1
Full Name (Last, First, Middle Initial) Mr. Daniel J. Fischer		Date of Receipt
Mailing Address 6 Moran Court		11 18 2013
City	State Zip Code	Transaction ID : 56841733
Binghamton	NY 13903-5927	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	1
Columbian Mutual Life Insurance Compan	Senior Vice President, General Counsel]
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Mr. Michael C. Fosbury CFA	'	Date of Receipt
Mailing Address 4504 Forest Lane		M = M / D = D / Y = Y = Y
City	State Zip Code	11 18 2013
Vestal	NY 13850-3803	Transaction ID : 56841734 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	1
Columbian Mutual Life Insurance Compan	SVP & CIO	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 4704 Vestal Parkway East		11 18 _ 2013 _
City	State Zip Code	Transaction ID: 56841735
Birmingham	NY 13902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	1
Columbian Mutual Life Insurance Compan	SVP & CFO	_
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)	>	1200.00
	<u> </u>	
TOTAL This Period (last page this line number	er only)	1

FOR LINE NUMBER: **PAGE** 9 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. Stuart W. Smith Date of Receipt Mailing Address 3595 Chrstnut Drive 2013 11 18 City Zip Code State Transaction ID: 56841736 GΑ Doraville 30340-2035 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. Name of Employer Occupation Columbian Mutual Life Insurance Compan Information Systems Management Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeanne M Clarke Date of Receipt Mailing Address 507 Plum St 11 18 2013 City State Zip Code Transaction ID: 56841737 NY Syracuse 13204-5429 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Columbian Mutual Life Insurance Compan Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Jack Greenberg Date of Receipt Mailing Address 11 Devonshire Court 11 18 2013 City Zip Code State Transaction ID: 56841738 NY Plainview 11803-3209 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Columbian Mutual Life Insurance Compan Vice President, Pricing & Product Deve Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 900.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOF	FOR LINE NUMBER: PAGE 10 OF								
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		117

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Council of Life Insure	ers Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. Gerald J. Hennenhoefer		Date of Receipt
Mailing Address 34 Deer Creek Drive		1,1 18 2013
City	State Zip Code	Transaction ID: 56841739
O Fallon	MO 63366-1459	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Columbian Mutual Life Insurance Compan	Vice President, Sales & Marketing	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Richard S. Relf Jr.		Date of Receipt
Mailing Address 3708 Lake Moraine Road	7. 0.	11 18 2013
City Madison	State Zip Code NY 13402-1606	Transaction ID : 56841740
	15.102 1500	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Columbian Mutual Life Insurance Compan	Occupation	
Receipt For:	VP, Administration	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Todd Swenson		Date of Receipt
Mailing Address 4704 Vestal Parkway East		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Binghamton	State Zip Code NY 13902	Transaction ID : 56841741 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Columbian Mutual Life Insurance Compan	Vice Prseide Special Markets	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	······	750.00
TOTAL This Period (last page this line number		

FOR LINE NUMBER: PAGE 11 OF 40 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Steven Szubert Date of Receipt Mailing Address 4704 Vetsal Parkway East 2013 11 18 City Zip Code State Transaction ID: 56841742 NY Binghamton 13902 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Controller Columbian Mutual Life Insurance Compan Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jay W Wason Jr Date of Receipt Mailing Address P O Box 1056 11 18 2013 City State Zip Code Transaction ID: 56841743 NY Syracuse 13201-1056 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Columbian Mutual Life Insurance Compan VP - Associate General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr Patrick A Mannion Date of Receipt Mailing Address 7665 Hunt Lane 11 18 2013 City Zip Code State Transaction ID: 56841758 NY Fayetteville 13066-2555 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation President & Chief Executive Officer Columbian Mutual Life Insurance Compan Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Larry Zimpleman Date of Receipt Mailing Address 2186 South Orilla Rd 2013 11 22 City State Zip Code Transaction ID: 56841760 Cumming IΑ 50061-7506 Amount of Each Receipt this Period FEC ID number of contributing C 2500.00 federal political committee. Name of Employer Occupation CEO Principal Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Curt Hagelman Date of Receipt Mailing Address 5425 Tivoli Drive 11 29 2013 City State Zip Code Transaction ID: 56841856 FL Orlando 32836 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Hannover Life Reassurance Company of A Senior Vice President, CMO Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Steve B Najjar Date of Receipt Mailing Address 800 N Magnolia Avenue 11 29 2013 Suite 1400 City State Zip Code Transaction ID: 56841857 FL Orlando 32803-3248 Amount of Each Receipt this Period FEC ID number of contributing 375.00 С federal political committee. Name of Employer Occupation EVP, Sr. Mkts/General Counsel Hannover Life Reassurance Company of A Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 3125.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	FOF	FOR LINE NUMBER: PAGE 13 O								
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		117

	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Council of Life Insure	ers Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. Harold E. Riley		Date of Receipt
Mailing Address P.O. Box 149151		11 29 2013
City Austin	State Zip Code TX 78714-9151	Transaction ID : 56841859 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	5000.00
Name of Employer CICA Life Insurance Company of America Receipt For: Primary General Other (specify) ▼	Occupation Chairman Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Mr. Donald L. Walker Mailing Address 101 Constitution Ave, NW		Date of Receipt
Suite 700	State Zip Code	11 30 2013
Washington	DC 20001-2133	Transaction ID : PR1156427129578 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer American Council of Life Insurers	Occupation SVP, Administration & CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	P/R Deduction (\$50.00 Semi-Monthly)
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 10075 Red Run Blvd		11 30 2013
City Owings Mills	State Zip Code MD 21117-4865	Transaction ID : PR1231727529578 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	22.00
Name of Employer	Occupation	
Baltimore Life Insurance Company Receipt For: Primary General Other (specify) ▼	Senior Vice President, Operations Aggregate Year-to-Date ▼ 264.00	P/R Deduction (\$11.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	•	5122.00

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)			(chack ank and)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements mand the state of the name and a	ay not be sold or used by any peddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Council of Life Ins	surers Politica	al Action Committee	
Full Name (Last, First, Middle Initial) A. Mr. W. Bryant Sadler			Date of Receipt
Mailing Address 101 Constitution Ave, NV Suite 700 City	V State	Zip Code	11 30 2013 Transaction ID : PR1415470229578
Washington	DC	20001-2140	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer American Council of Life Insurers Receipt For: Primary Other (specify)	Occupation Staff Accou Aggregate		P/R Deduction (\$10.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) Ms. Mandana Parsazad Mailing Address 1914 Horse Shoe Drive			Date of Receipt
			11 30 2013
City	State	Zip Code	Transaction ID : PR1481799829578
Vienna	VA	22182-3755	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer American Council of Life Insurers	Occupation Senior Coul	nsel, Taxes & Retirement Sec	
Receipt For: Primary General Other (specify) ▼	30.0	Year-to-Date ▼ 440.00	P/R Deduction (\$20.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) C. Mr. Scott E. Smith	·		Date of Receipt
Mailing Address 19 Cardinal Way			11 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City South Windsor	State CT	Zip Code 06074-3745	Transaction ID : PR1503555329578 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer	Occupation		

100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

480.00

Senior Vice President & COO

Aggregate Year-to-Date ▼

P/R Deduction (\$20.00 Bi-Weekly)

Vantis Life Insurance Company

Other (specify)

General

Receipt For:

Primary

FOR LINE NUMBER: PAGE 15 OF 40 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. Craig D Simms Date of Receipt Mailing Address 31 Quail Hollow Drive 30 2013 11 City State Zip Code Transaction ID: PR1503559929578 CT Southington 06489-1617 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Vantis Life Insurance Company Senior Vice President, Sales & Marketi Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Peter L Tedone Date of Receipt Mailing Address 32 Lincoln 11 30 2013 City State Zip Code Transaction ID: PR1503560129578 CT Weatogue 06089-9780 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Vantis Life Insurance Company President & Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 480.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Walter C. Welsh Date of Receipt Mailing Address 101 Constitution Ave, NW 11 30 2013 101 Constitution Ave, NW City Zip Code State Transaction ID: PR1550105929578 DC Washington 20001-2140 Amount of Each Receipt this Period FEC ID number of contributing 387.18 С federal political committee. Name of Employer Occupation American Council of Life Insurers **Executive Vice President** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$193.59 Semi-Monthly) 4258.99 Other (specify) 447.18 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE (check only one) X 11a 11b 11c

16 OF 40 Use separate schedule(s) for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Ms. Gail S. Hoeflich Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 30 2013 11 City Zip Code State Transaction ID: PR1565786729578 DC Washington 20001-2140 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Legislative Director American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Semi-Monthly) 440.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Shannon N. Salinas Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 11 30 2013 City State Zip Code Transaction ID: PR1647849729578 DC Washington 20001-2140 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Counsel, Taxes & Retirement Security Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Semi-Monthly) 440.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Kathleen F. Kiernan-Pagani Date of Receipt Mailing Address 101 Constitution Ave, NW 30 2013 Suite 700 City Zip Code State Transaction ID: PR1728112729578 DC Washington 20001-2140 Amount of Each Receipt this Period FEC ID number of contributing 234.38 С federal political committee. Name of Employer Occupation American Council of Life Insurers Sr. Counsel, State Relations Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$117.19 Semi-Monthly) 2431.83 Other (specify) 314.38 SUBTOTAL of Receipts This Page (optional).....

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TOTAL This Period (last page this line number only).....

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Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	X 11a 11b	11c 12
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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Council of Life Insure	ers Political Action Committee	
Full Name (Last, First, Middle Initial) A. Mr. Edmund V Mahoney		Date of Receipt
Mailing Address 20 Northgate		11 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : PR1729084729578
Simsbury	CT 06070-1021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	19.24
Name of Employer	Occupation	
Vantis Life Insurance Company	Vice President, Investments	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88	P/R Deduction (\$9.62 Bi-Weekly)
Full Name (Last, First, Middle Initial) Ms. Carolyn C. Cobb		Date of Receipt
Mailing Address 101 Constitution Ave, NW Suite 700		11 30 2013
City	State Zip Code	Transaction ID : PR1821819629578
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	222.18
Name of Employer American Council of Life Insurers	Occupation Vice President & Associate General Cou	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2333.86	P/R Deduction (\$111.09 Semi-Monthly)
Full Name (Last, First, Middle Initial) The Honora Dirk A. Kempthorne		Date of Receipt
Mailing Address 101 Constitution Ave, NW Suite 700		11 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20001-2133	Transaction ID : PR1871324529578
	20001-2100	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	416.66
Name of Employer	Occupation	1
American Council of Life Insurers	President and CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	4583.26	P/R Deduction (\$208.33 Semi-Monthly)
SUBTOTAL of Receipts This Page (optional)		658.08
TOTAL This Period (last page this line numbe	r only)	

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political committee	
Full Name (Last, First, Middle Initial)	urers Political Action Committee	
Lisa Smith		Date of Receipt
Mailing Address 800 North Magnolia Ave. Suite 1400		11 30 2013
City	State Zip Code	Transaction ID : PR1871488829578
Orlando	FL 32803-3248	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Hannover Life Reassurance Company of A	Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	P/R Deduction (\$20.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) 3. Mr. Brian Waidmann		Date of Receipt
Mailing Address 101 Constitution Ave, NW		M = M / D = D / Y = Y = Y
Suite 700 City	State Zip Code	11 30 2013
Uty Washington	DC 20001-2133	Transaction ID : PR1872428329578
	2000.2.00	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer American Council of Life Insurers	Occupation	
	Chief of Staff	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4600.00	P/R Deduction (\$200.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) C. Mr. Peter J. Bautz	·	Date of Receipt
Mailing Address 101 Constitution Ave, NW Suite 700		11 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20001-2133	Transaction ID : PR1903849829578 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	
American Council of Life Insurers	Vice President, Taxes and Retirement S	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	440.00	P/R Deduction (\$20.00 Semi-Monthly)
SUBTOTAL of Receipts This Page (optional) >	490.00
FOTAL This Period (last page this line num	per only)	

		R LINE			:	PAGE	_ 1	19	OF	40
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Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
American Council of Life Insure	rs Political Action Committee	
Full Name (Last, First, Middle Initial) A. Jim Pyc		Date of Receipt
Mailing Address 9124 MidPines Court		11 30 2013
City	State Zip Code	Transaction ID : PR1948888429578
Orlando	FL 32819-4307	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	36.00
Name of Employer	Occupation	
Hannover Life Reassurance Company of A	EVP, financial Solutions	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	P/R Deduction (\$12.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) 3. William R Hobbs		Date of Receipt
Mailing Address 13005 Windsor Circle		M = M / D = D / Y = Y = Y
City	State Zip Code	11 30 2013
City Leawood	State Zip Code KS 66209-1793	Transaction ID : PR1964225729578
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Fidelity Security	VP Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) C. Anita Peduzzi		Date of Receipt
Mailing Address 101 Constitution Avenue Suite 700 W		11 30 Y Y Y Y Y Y
City	State Zip Code DC 20001-2146	Transaction ID : PR1978714929578
Washington	DC 20001-2146	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	
American Council of Life Insurers	PAC Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	916.74	P/R Deduction (\$41.67 Semi-Monthly)
SUBTOTAL of Receipts This Page (optional)		144.34
TOTAL This Period (last page this line number of	only)	

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Joshua T. Mauthe Date of Receipt Mailing Address 2210 12th St NW 30 2013 11 City Zip Code State Transaction ID: PR1978715629578 DC Washington 20009-4404 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation Meeting Planner-Special Projects Coord American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Semi-Monthly) 440.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Richard Jones Jr Date of Receipt Mailing Address 4545 Wornall Rd #1010-1011 11 30 2013 City State Zip Code Transaction ID: PR2008166729578 MO Kansas City 64111-3270 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Name of Employer Occupation Fidelity Security Life Insurance Co. Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Semi-Monthly) 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Seaver J. J Sowers Date of Receipt Mailing Address 101 Constitution Avenue NW 30 2013 City Zip Code State Transaction ID: PR2018796029578 DC Washington 20001-2140 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Director, Federal Relations American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Semi-Monthly) 330.00 Other (specify) 85.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -9

FOR LINE NUMBER: PAGE 21 (check only one) X 11a 11b 11c

OF 40 Use separate schedule(s) for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Paul Smith Date of Receipt Mailing Address 800 N Magnolia Avenue Suite 1400 30 2013 11 City State Zip Code Transaction ID: PR2019034829578 FL Orlando 32803-3248 Amount of Each Receipt this Period FEC ID number of contributing 532.00 federal political committee. Name of Employer Occupation SVP, Chief Information Officer Hannover Life Reassurance Company of A Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.50 Semi-Monthly) 712.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Marla Lauterette Date of Receipt Mailing Address 800 N Magnolia Avenue **Suite 1400** 30 11 2013 City State Zip Code Transaction ID: PR2019035329578 FL Orlando 32803-3248 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation Hannover Life Reassurance Company of A VP, Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$350.00 Semi-Monthly) 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jessica M. M Hanson Date of Receipt Mailing Address 1707 Prince St. 30 2013 #2 City State Zip Code Transaction ID: PR2023274629578 Alexandria VA 22314-2804 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President, Communications Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Semi-Monthly) 550.00 Other (specify) 932.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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	ers Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. Gary E. Hughes Mailing Address 101 Constitution Avenue, NV Suite 700 West City Washington FEC ID number of contributing federal political committee. Name of Employer American Council of Life Insurers Receipt For: Primary General Other (specify)		Date of Receipt 11 30 2013 Transaction ID: PR771358229578 Amount of Each Receipt this Period 330.50 P/R Deduction (\$165.25 Semi-Monthly)
Full Name (Last, First, Middle Initial) Ms. Linda H. Cunningham Mailing Address 101 Constitution Avenue, NV Suite 700 West City Washington FEC ID number of contributing federal political committee. Name of Employer	State Zip Code DC 20001-2133 C	Date of Receipt 11 30 2013 Transaction ID : PR771362429578 Amount of Each Receipt this Period 112.96
American Council of Life Insurers Receipt For: Primary General Other (specify) ▼	Vice President, Conference Development Aggregate Year-to-Date ▼ 1242.56	P/R Deduction (\$56.48 Semi-Monthly)
Full Name (Last, First, Middle Initial) Ms. Roberta B. Meyer Mailing Address 101 Constitution Avenue, NV Suite 700 West City Washington FEC ID number of contributing federal political committee. Name of Employer American Council of Life Insurers Receipt For: Primary General Other (specify)	State Zip Code DC 20001-2133 C Occupation Vice President & Associate General Cou Aggregate Year-to-Date ▼ 220.00	Date of Receipt 11 30 2013 Transaction ID: PR771362729578 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Semi-Monthly)
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	463.46
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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. John F. Dolan Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 West 30 2013 11 City Zip Code State Transaction ID: PR771365429578 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Name of Employer Occupation Vice President, Media Relations American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Semi-Monthly) 660.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. J. Bruce Ferguson Date of Receipt Mailing Address 101 Constitution Avenue, NW Suite 700 West 11 30 2013 City State Zip Code Transaction ID: PR771373229578 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 300.32 federal political committee. Name of Employer Occupation American Council of Life Insurers Senior Vice President, State Relations Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$150.16 Semi-Monthly) 3303.52 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Shawn Hausman Date of Receipt Mailing Address 101 Constitution Avenue, NW 30 Suite 700 West 11 2013 City Zip Code State Transaction ID: PR771373529578 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 61.92 С federal political committee. Name of Employer Occupation American Council of Life Insurers Sr. Vice President, Public Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.96 Semi-Monthly) 681.12 Other (specify) 422.24 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -9

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Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·	
American Council of Life Insure	rs Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. David M. Leifer		Date of Receipt
Mailing Address 101 Constitution Avenue, NW Suite 700 West		11 30 2013
City	State Zip Code	Transaction ID : PR771374029578
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	167.16
Name of Employer	Occupation	
American Council of Life Insurers	Vice President & Associate General Cou	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1838.76	P/R Deduction (\$83.58 Semi-Monthly)
Full Name (Last, First, Middle Initial) Mr. James D. Hall		Date of Receipt
Mailing Address 101 Constitution Avenue, NW		M = M / D = D / Y = Y = Y
Suite 700 West City	State Zip Code	11 30 2013
Washington	DC 20001-2133	Transaction ID : PR771374329578 Amount of Each Receipt this Period
	2000 2 100	Amount of Lacif necespt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
American Council of Life Insurers	Regional Vice President, State Relatio	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	P/R Deduction (\$15.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) C. Mr. C. Bryan Cox		Date of Receipt
Mailing Address 101 Constitution Avenue, NW Suite 700 West		11 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20001-2133	Transaction ID : PR771376829578
FEC ID number of contributing federal political committee.	C 20001-2133	Amount of Each Receipt this Period 56.66
Name of Employer	Occupation	
American Council of Life Insurers	Regional Vice President, State Relatio	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	623.27	P/R Deduction (\$28.33 Semi-Monthly)
SUBTOTAL of Receipts This Page (optional)		253.82
TOTAL This Period (last page this line number	only)	

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EMIZED RECEIPTS	for each category of the Detailed Summary Page	`	ck only 11a 13	 e) 11b 14	11c 15	\vdash	12 16	17
ny information copied from such Reports and Statements may for commercial purposes, other than using the name and a	, , , ,				_			

A or NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. John W. Mangan CEBS Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 30 2013 11 City Zip Code State Transaction ID : PR771377129578 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Regional Vice President, State Relatio Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Semi-Monthly) 2200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Kimberly O. Dorgan Date of Receipt Mailing Address 101 Constitution Avenue, NW Suite 700 West 11 30 2013 City State Zip Code Transaction ID: PR771395129578 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 416.66 federal political committee. Name of Employer Occupation American Council of Life Insurers Senior Executive Vice President, Publi Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$208.33 Semi-Monthly) 4583.26 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Olivia H. Gillis Date of Receipt Mailing Address 101 Constitution Ave, NW M M / 30 11 2013 Suite 700 City Zip Code State Transaction ID: PR771408129578 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation American Council of Life Insurers Assoc. Director, Legislative & Regulat Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Semi-Monthly) 220.00 Other (specify) 636.66 SUBTOTAL of Receipts This Page (optional).....

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ng the name and address of any political committee	
American Council of Life Ins	surers Political Action Committee	
Ms. Maria L. Palacios		Date of Receipt
Mailing Address 101 Constitution Avenue Suite 700 West	e, NW	11 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : PR771408829578
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.36
Name of Employer	Occupation	
American Council of Life Insurers	Managing Director, Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 223.95	P/R Deduction (\$10.18 Semi-Monthly)
Full Name (Last, First, Middle Initial) Mr. Morris R. Goff		Date of Receipt
Mailing Address 101 Constitution Avenue	e, NW	M = M / D = D / Y = Y = Y
Suite 700 West	State Zin Code	11 30 2013
City Washington	State Zip Code DC 20001-2133	Transaction ID : PR771419329578
	2000 1 2 100	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	197.26
Name of Employer	Occupation	
American Council of Life Insurers	Vice President, Federal Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2169.86	P/R Deduction (\$98.63 Semi-Monthly)
Full Name (Last, First, Middle Initial) . Ms. Brenda S. Nation	<u>'</u>	Date of Receipt
Mailing Address 101 Constitution Avenue Suite 700 West		11 30 / 2013
City Washington	State Zip Code DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	
American Council of Life Insurers	Regional Vice President, State Relatio	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1650.00	P/R Deduction (\$75.00 Semi-Monthly)
SUBTOTAL of Receipts This Page (option	al)	367.62
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TOTAL This Period (last page this line nu	mber only)	

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Ms. Debra K. West Date of Receipt Mailing Address 101 Constitution Avenue, NW Suite 700 West 30 2013 11 City Zip Code State Transaction ID: PR771421029578 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Regional Vice President, State Relatio Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Semi-Monthly) 1100.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Michael Lovendusky Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 11 30 2013 City State Zip Code Transaction ID: PR771421129578 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President & Associate General Cou Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Semi-Monthly) 440.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Jeffry J. Janoska Date of Receipt Mailing Address 101 Constitution Avenue, NW 30 2013 Suite 700 City Zip Code State Transaction ID: PR771423129578 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 24.10 С federal political committee. Name of Employer Occupation American Council of Life Insurers Senior Policy Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.05 Semi-Monthly) 265.10 Other (specify) 164.10 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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for each category of the Detailed Summary Page	X 11a 1	11b	11c	12	
	13 1	14	15	16	717

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name (Last, First, Middle Initial) Ms. Lisa J. Tate Mailing Address 101 Constitution Avenue, NW Suite 700 City	State Zip Code	Date of Receipt 11 30 2013
Washington	DC 20001-2133	Transaction ID : PR771423229578
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 80.00
Name of Employer American Council of Life Insurers Receipt For: Primary General Other (specify)	Occupation VP, Litigation & Assoc. Gen. Counsel Aggregate Year-to-Date ▼ 880.00	P/R Deduction (\$40.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) Ms. Nina Aponte Mailing Address 101 Constitution Ave, NW		Date of Receipt
Suite 700 City Washington	State Zip Code DC 20001-2133	11 30 2013 Transaction ID : PR771425329578 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer American Council of Life Insurers	Occupation Senior Staff Accountant	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	P/R Deduction (\$10.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) Mr. David C. Turner		Date of Receipt
Mailing Address 101 Constitution Ave, NW Suite 700 City	State Zip Code	11 30 2013 Transaction ID : PR771428929578
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	264.08
Name of Employer American Council of Life Insurers	Occupation EVP, Chief of Staff & Corp. Secretary	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2904.88	P/R Deduction (\$132.04 Semi-Monthly)

FOR LINE NUMBER: PAGE 29 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Ms. Miriam Krol Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 30 2013 11 City Zip Code State Transaction ID: PR771434029578 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President, Long Term Care Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Semi-Monthly) 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Kynondo Lewis Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 11 30 2013 City State Zip Code Transaction ID: PR771439629578 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 21.42 federal political committee. Name of Employer Occupation American Council of Life Insurers Legal Editor Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.71 Semi-Monthly) 236.04 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Alane R. Dent Date of Receipt Mailing Address 101 Constitution Ave, NW 30 11 2013 Suite 700 City Zip Code State Transaction ID: PR771444329578 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 191.66 С federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President, Federal Relations Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$95.83 Semi-Monthly) 2108.27 Other (specify) 233.08 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 30 OF Use separate schedule(s)

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		y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Council of Life Insur	ers Political Action Committ	ee
Full Name (Last, First, Middle Initial) Mr. T. Scott Dixon Mailing Address 101 Constitution Avenue NV Suite 700 West	V	Date of Receipt 11 30 2013
City	State Zip Code	Transaction ID : PR771444929578
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	
American Council of Life Insurers	Finance Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440	P/R Deduction (\$20.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) 3. Mr. Andrew M. Melnyk		Date of Receipt
Mailing Address 101 Constitution Avenue NV Suite 700 City		11 30 2013
Washington	State Zip Code DC 20001-2133	Transaction ID : PR771445829578 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.02
Name of Employer American Council of Life Insurers	Occupation Managing Director, Research	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$20.01 Semi-Monthly)
Full Name (Last, First, Middle Initial) C. Ms. Julie A. Spiezio		Date of Receipt
Mailing Address 101 Constitution Avenue NV Suite 700		11 30 / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y
City Washington	State Zip Code DC 20001-2133	Transaction ID : PR771449629578
	20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
American Council of Life Insurers	Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550	P/R Deduction (\$25.00 Semi-Monthly)
SUBTOTAL of Receipts This Page (optional)		130.02
TOTAL This Period (last page this line number	r only)	· · · · · · · · · · · · · · · · · · ·

FOR LINE NUMBER: PAGE 31 OF 40 Use separate schedule(s) (check only one) X 11a 11b 12 11c 14 13 15 16

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. John K. Bruins Date of Receipt Mailing Address 101 Constitution Avenue NW Suite 700 30 2013 11 City Zip Code State Transaction ID: PR771450129578 DC 20001-2133 Washington Amount of Each Receipt this Period FEC ID number of contributing 33.34 federal political committee. Name of Employer Occupation American Council of Life Insurers Senior Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$16.67 Semi-Monthly) 366.73 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Raymond J. Hazel Date of Receipt Mailing Address 7 Daydilly Court 11 30 2013 City State Zip Code Transaction ID: PR796887929578 DE Wilmington 19808-1951 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation London Life Reinsurance Company VP Finance, & CFO Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Bi-Weekly) 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Maurice A. Perkins Date of Receipt Mailing Address 101 Constitution Ave, NW 30 2013 Suite 700 City Zip Code State Transaction ID: PR805149129578 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 329.00 С federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President, Federal Relations Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$208.33 Semi-Monthly) 2742.39 Other (specify) 412.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 32 OF Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than usin	g the name and address of any political committee to	o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Council of Life Ins	urers Political Action Committee			
Suite 700	Mr. Wayne A. Mehlman Mailing Address 101 Constitution Avenue, NW Suite 700			
City Washington FEC ID number of contributing federal political committee. Name of Employer American Council of Life Insurers Receipt For: Primary General	State Zip Code DC 20001-2133 C Occupation Counsel, Insurance Regulation Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 50.00		
Other (specify) ▼ Full Name (Last, First, Middle Initial)	550.00	P/R Deduction (\$25.00 Semi-Monthly)		
Mailing Address		Date of Receipt		
FEC ID number of contributing federal political committee. Name of Employer	State Zip Code C Occupation	Amount of Each Receipt this Period		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼			
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee.	State Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Amount of Each Receipt this Period		
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate Year-to-Date ▼			
SUBTOTAL of Receipts This Page (options	al)	50.00		
TOTAL This Period (last page this line nun	nber only)	24615.40		

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	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 33 OF 40 (check only one)
IT	EMIZED RECEIPTS		for each category of the	
			Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements mand a	I ay not be sold or used by any pa address of any political committee	erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American Council of Life Insurer	s Politica	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Sammons Enterprises Inc. PAC			Date of Receipt
	Mailing Address 5949 Sherry Lane Suite 1900			11 11 2013
	City	State	Zip Code	Transaction ID : 56838109
	Dallas	TX	75225	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		5000.00
	Name of Employer	Occupation	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	7 1991 09410	. Can to Date (1
	Other (specify) ▼		5000.00	
	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	
	ony .	Olalo	2.p 0000	Amount of Each Receipt this Period
	EEC ID number of contributing			Amount of Each freedipt this Feriod
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		<u> </u>	
C.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	, iggi ogale	10a. 10 Buto 4	1
	Other (specify) ▼		7 7 *	
	SURTOTAL of Receipts This Page (ontional)			5000.00

TOTAL This Period (last page this line number only).....

5000.00

ITE	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 OF 40 (check only one) 11a 11b 11c 12 13 14 15 X 16 17			
or	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Council of Life Insurer	name and a	ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.			
Α.	Full Name (Last, First, Middle Initial) Tim Johnson for South Dakota Mailing Address P O Box 1536 City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2014 Primary General	m Johnson for South Dakota ling Address P O Box 1536 State Zip Code bux Falls SD 57101 C ID number of contributing eral political committee. The of Employer Occupation Aggregate Year-to-Date ▼					
B.	Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Amount of Each Receipt this Period			
C.	Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Amount of Each Receipt this Period			
SI	JBTOTAL of Receipts This Page (optional)			500.00			

TOTAL This Period (last page this line number only).....

500.00

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 35 OF 40		
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	INOMBETT.		
Any information copied from such Reports and Staten or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
American Council of Life Insurers F	Political Action Comr	mittee			
Full Name (Last, First, Middle Initial)			B (B)		
A. Kirk For Senate			Date of Disbursement		
Mailing Address P.O. Box 8			11 18 2013		
•	State Zip Code		Transaction ID : 54690007		
Winnetka Purpose of Disbursement	IL 60093				
Correct committee name for previously issued chec	k	011	Amount of Each Disbursement this Period		
Candidate Name		Category/	1000.00		
Rep. Mark Kirk Office Sought: House Disburser	ment For: 2016	Туре			
Senate President	Primary General Other (specify) ▼		[MEMO ITEM] Correct committee name for previously issued of		
State: IL District:					
Full Name (Last, First, Middle Initial) 3. Montanans For Tester			Date of Disbursement		
Mailing Address PO Box 1135	D Box 1135				
Helena	State Zip Code MT 59624		Transaction ID: 55466260		
Purpose of Disbursement		011	Amount of Each Disbursement this Period		
Candidate Name		Category/			
Sen. Jon Tester		Type	1500.00		
	nent For: 2018 Primary General Other (specify)				
Full Name (Last, First, Middle Initial)					
Terri Sewell For Congress			Date of Disbursement		
Mailing Address P.O. Box 1964			11 22 2013		
	State Zip Code		Transaction ID : 55466261		
Birmingham	AL 35201				
Fulpose of Dispulsement	Purpose of Disbursement				
Candidate Name	011 Category/	Amount of Each Disbursement this Period			
Rep. Terri Sewell		Type	1000.00		
Senate President	nent For: 2014 Primary General Other (specify)				
-			2500.00		
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	2500.00		
TOTAL This Period (last page this line number only)					

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAG			
ITEMIZED DISBURSEMENTS	Use separate schedule(for each category of the	(s) (check only	one)		
	Detailed Summary Page		22 X 23 24 25 26 28a 28b 28c 29 30		
Any information copied from such Reports and State	ments may not be sold or				
or for commercial purposes, other than using the nati					
NAME OF COMMITTEE (In Full)					
American Council of Life Insurers	Political Action Co	mmittee			
Full Name (Last, First, Middle Initial)					
4. Friends Of John Barrasso			Date of Disbursement		
Mailing Address PO Box 52008			11 22 2013		
City	State Zip Code		Transaction ID : 55466262		
Casper	WY 82605		Hansaction ID . 55400202		
Purpose of Disbursement		011	Amount of Each Disbursement this Period		
Candidate Name		Category/			
Sen. John Barrasso MD		Type	1000.00		
Office Sought: House Senate President Disburse	ment For: 2014 Primary General Other (specify)	I			
State: WY District:	Other (specify)				
Full Name (Last, First, Middle Initial)					
Grenshaw For Congress Campaig	ın		Date of Disbursement		
Mailing Address 7235 Bonneval Road Suite 210			11 22 2013		
City Jacksonville	State Zip Code FL 32256		Transaction ID: 55466280		
Purpose of Disbursement		011	Amount of Each Disbursement this Period		
Candidate Name					
Rep. Ander Crenshaw		Category/ Type	1000.00		
	ment For: 2014 Primary General Other (specify)				
State: FL District: 04					
Full Name (Last, First, Middle Initial) Lynn Jenkins For Congress			Date of Disbursement		
Mailing Address P O Box 1441			11 22 2013		
City	State Zip Code		Transaction ID : 55466294		
Topeka	KS 66601		Transaction ID : 55466281		
Purpose of Disbursement		011			
Candidate Name			Amount of Each Disbursement this Period		
Lynn Jenkins		Category/ Type	1000.00		
•	ment For: 2014 Primary General Other (specify) ▼				
State: KS District: 02	- 				
SUBTOTAL of Disbursements This Page (optional).			3000.00		
		<u> </u>			
TOTAL This Period (last page this line number only	/)				

SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 37 OF 40											
	EMIZED DISBURSEMENTS		arate schedule(s)		FOR LINE NUMBER: PAGE 37 OF (check only one)				J1 40						
111	LIVIIZED DISDUNSEIVIEN IS		category of the	'		21b [26					
		Detailed	Summary Page		H	27	28a	$\overline{}$	28b	28	8c -	29	30		
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$\overline{}$	NAME OF COMMITTEE (In Full)														
	American Council of Life Insurers F	Political	Action Com	mitte	e										
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	Full Name (Last, First, Middle Initial)														
Α.	Friends Of Dick Durbin Committee						Date of Disbursement								
	ALC:						M M / D D / Y Y Y Y								
	Mailing Address P O Box 1949						11 22 2013								
	O'th.														
	City Springfield	State II	tate Zip Code IL 62705					sactio	on ID	: 5546	6289				
	Purpose of Disbursement	16													
	. alpose of Diobalosmont			ſ)11	71	Amoun	t of F	Each	Disbur	semer	nt this	Period		
	Candidate Name														
	Sen. Richard Durbin				egory ype	//	1000.00								
		nent For:	2014	-	,,,,				,		,				
		Primary	General												
	President	Other (spe	ecify) 🔻												
	State: IL District:														
	Full Name (Last, First, Middle Initial)														
В.	•						Date of Disbursement								
							M M / D D / Y Y Y Y								
	Mailing Address P.O. Box 1091				11		22	2	2	2013					
	•	State	Zip Code				Trans	sactio	on ID	: 5546	6294				
	Tuscaloosa	AL	35401												
	Purpose of Disbursement				011		Amoun	t of E	Eoob I	Diobur	oomor	st thin	Dariad		
Candidate Name								Amount of Each Disbursement thi							
	Richard Shelby				egory ype	//						100	0.00		
		nent For:	2016		ype				,		,				
		Primary	General												
		Other (spe													
	State: AL District:	(0)	√												
_	Full Name (Last, First, Middle Initial)					$\overline{}$									
	Carper for Senate						Date of	f Disl	bursei	ment					
							M M / D D / Y Y Y Y								
	Mailing Address P O Box 2882				11 22 2013										
	,	State	Zip Code				Trans	sactio	on ID	: 5546	6300				
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	Purpose of Disbursement		14.4	7											
	Candidate Name)11		Amount of Each Disbursement this Period						Period			
	Thomas Carper		Category/			1000.00						0.00			
	•	nent For:	2019	l'	уре				,	_	7				
		Primary	General												
	President	Other (spe													
	State: DE District:	Other (spe	cony) \blacktriangledown												
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	IIPTOTAL of Dishursoments This Boss (entional)											3000	0.00		
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 38 OF 40								
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)								
	Detailed Summary Page	21b	22 X 23 24 25 26							
[27	28a 28b 28c 29 30b							
Any information copied from such Reports and Sta or for commercial purposes, other than using the n										
NAME OF COMMITTEE (In Full)										
American Council of Life Insurers	Political Action Com	mittee ————								
Full Name (Last, First, Middle Initial)										
A. Kirk For Senate	Date of Disbursement									
Mailing Address P.O. Box 8	11 22 2013									
City	State Zip Code		Transaction ID : 55466313							
Winnetka	IL 60093		Transaction ID . 33400313							
Purpose of Disbursement		011	Amount of Each Disbursement this Period							
Candidate Name		Category/	1000.00							
Rep. Mark Kirk		Type	1000.00							
Office Sought: House Senate President	sement For: 2016 Primary General Other (specify) ▼									
State: IL District:										
Full Name (Last, First, Middle Initial)	·									
B. Hagan For Us Senate		Date of Disbursement								
Mailing Address PO Box 29103	11 22 2013									
City Greensboro	State Zip Code NC 27429		Transaction ID : 55466318							
Purpose of Disbursement		011	Amount of Each Disbursement this Period							
Candidate Name		Category/	1000.00							
Kay Hagan		Туре	1000.00							
Office Sought: House Senate President State: NC District:	sement For: 2014 Primary									
Full Name (Last, First, Middle Initial)										
c. Roskam For Congress Committee	Date of Disbursement 11 22 2013									
Mailing Address P. O. Box 713										
City										
Wheaton Purpose of Disbursement										
	011	Amount of Each Disbursement this Period								
Candidate Name	Category/									
Rep. Peter Roskam	Type	1000.00								
Senate President	sement For: 2014 Primary General Other (specify) ▼		,							
State: IL District: 06										
SUBTOTAL of Disbursements This Page (optional)	······•	3000.00							
TOTAL This Period (last page this line number or	ıly)									

SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 39 OF 40										
ITEMIZED DISBURSEMENT			parate schedule(s)					<u> </u>						
II LIVIIZED DISDURSEIVIEN I	ی ا		category of the	,		21b [
		Detailed	d Summary Page			27	28a		28b	28	3c	29	H_3	
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or for commercial purposes, other than us														
NAME OF COMMITTEE (In Full)														
American Council of Life In	surers P	olitical	Action Com	mitte	96									
/ Amonoan Coanon of End in	ouroro r	Ontioai	7 (01:01) 0011		,									
Full Name (Last, First, Middle Initial)														
Bill Nelson For U S Senate							Date of Disbursement							
Mailing Address OTOM (AMI): 5 5							M M / D D / Y Y Y Y							
Mailing Address 972 West Whitmire Drive							11 22 2013							
City State Zip Code														
Melbourne		FL	32935				Trans	actio	n ID	: 55460	6335			
Purpose of Disbursement			32333			_								
				C	011		Amoun	t of E	Each	Disbur	semen	t this	Period	
Candidate Name								_	_					
Sen. Bill Nelson					egory ype	'	1000.00							
Office Sought: House	Disbursem	nent For:	2018	•	. 1	$\overline{}$								
X Senate	\times	Primary	General											
President		Other (sp	ecify) 🔻											
State: FL District:			•											
Full Name (Last, First, Middle Initial)														
B. Beatty For Congress							Date o	f Disl	bursei	ment				
						M = M / D = D / Y = Y = Y							Υ	
Mailing Address PO Box 172	Mailing Address PO Box 172						11		22	2	_ 2	2013		
City		state	Zip Code				Trans	sactio	on ID	: 5546	6337			
Columbus		OH	43216											
Purpose of Disbursement					011	7	Amoun	t of E	Eoob I	Diobur	oomon	t thio	Dariad	
Candidate Name					711	41	Amoun	l OI E	acii	Jisbuis	semen	1 11115	renou	
Rep. Joyce Beatty					egory	/	"					1000	0.00	
Office Sought: House	Disbursem	ent For:	2014	- 1	уре	_								
Senate		Primary	General											
President		Other (sp												
State: OH District: 03		ouloi (op	∪											
Full Name (Last, First, Middle Initial)														
Tom Reed For Congress							Date o	f Disl	bursei	ment				
Tom Reed For Congress							M M		D	D /	V 1	/ Y	V	
Mailing Address P O Box 450							11	1	22			2013		
City	S	state	Zip Code				Trans	actio	n ID	: 5546	6338			
Victor		NY	14564				IIalis	sacui	טו ווכ	. 5540	5556			
Purpose of Disbursement		_	7											
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Candidate Name					egory	/						1000	00	
Rep. Tom Reed				T	уре							1000		
Office Sought: House	Disbursem		_											
Senate		Primary	General											
President Pictricti		Other (sp	ecity) \blacktriangledown											
State: NY District: 29														
												3000	00	
SUBTOTAL of Disbursements This Page	(optional)											3000	7.00	
TOTAL This Period (last page this line no	umber only).						1 .							

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SCHEDULE B (FEC Form 3X)	11	FOR LINE NUMBER: PAGE 40 OF 40								
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	only one)							
	Detailed Summary Page	21b 27		24 25 26 28c 29 30b						
Any information copied from such Reports and State or for commercial purposes, other than using the na										
NAME OF COMMITTEE (In Full)										
American Council of Life Insurers	Political Action Com	mittee								
Full Name (Last, First, Middle Initial)										
A. Jeff Merkley For Oregon	Date of Disbursement									
Mailing Address P O Box 42307	11 22 2013									
City	State Zip Code		Transaction ID : 55466339							
Portland	OR 97242		Transaction iD . 334	00333						
Purpose of Disbursement		011	Amount of Each Disbu	rsement this Period						
Candidate Name		Category/								
Mr. Jeffrey Merkley		Type		1000.00						
Office Sought: House Senate President Disburse	ment For: 2014 Primary General Other (specify)									
State: OR District:	Other (openity)									
Full Name (Last, First, Middle Initial)										
B. Rush Holt For Congress		Date of Disbursement 11 22 2013								
Mailing Address PO Box 782										
City Pennington	State Zip Code NJ 08534		Transaction ID : 554	66346						
Purpose of Disbursement		011	Amount of Each Disbu	rsement this Period						
Candidate Name		Category/		4000.00						
Rep. Rush Holt		Type	7	1000.00						
	ment For: 2014 Primary General Other (specify)									
Full Name (Last, First, Middle Initial)										
C. Blaine For Congress		Date of Disbursement								
Mailing Address PO Box 1526		11 22 2013								
City	State Zip Code		Transaction ID : 554	66347						
Columbia Purpose of Disbursement	MO 65205									
. 4.,5000 0. 2.004.00	011 Amount of Each Disbursement this Pe									
Candidate Name	(
Mr. W. Blaine Luetkemeyer	Type		1000.00							
Office Sought: House Disburse	ment For: 2014 Primary General Other (specify)									
States IVIO Biotriot. Ug										
SUBTOTAL of Disbursements This Page (optional).		······	-	3000.00						
TOTAL This Period (last page this line number only	·)	······		17500.00						